Oklahoma Stand-Alone Prescription Drug Plan Organizations (PDP Region 23)

* The beneficiary drug premium covers prescription drugs only and does not cover medical or hospital benefits. Beneficiaries are responsible for their Part B premium and any premiums for Medigap coverage to meet their individual needs.

Includes contracts/plans approved as of September 25, 2005. The data does not reflect information for some demonstrations, National PACE organizations, Employer sponsored plans, or plans that were not approved by the "As of" date of the chart.

Organization Name	Plan Name	Beneficiary Total Drug Plan Premium	Drug Deductible			Includes Tiered Copay-	Type of Additional Coverage Offered in Coverage Gap		Mail	Number of Top 100
			Zero	Reduced	Standard (\$250)	ments for Drugs	Generics Only	Generics and Brands	Order Offered	Drugs on Formulary
Organization Name Aetna Life Insurance Company	Aetna Medicare Prescription Basic Plan	\$36.12	Zeio	Reduced	(\$250)	Drugs	Generics Only	Dianus	onered	82
BLUE CROSS AND BLUE SHIELD OF OKLAHOMA	Aetna Medicare Prescription Basic Plan Aetna Medicare Prescription Standard Plan	\$46.79	•	-	•				•	82
	Aetna Medicare Prescription Standard Plan Aetna Medicare Prescription Premier Plan	\$62.76	-		1	•	· ·		•	95
	Medicare Blue Rx Basic	\$30.09	•		•	•	•		•	96
	Medicare Blue Rx Basic Medicare Blue Rx Basic Plus	\$30.09	•	1	•				•	96
		\$31.17		1	<u> </u>	•			•	96
	Medicare Blue Rx Enhanced		•	1	<u> </u>	•	•		•	
CIGNA HealthCare	Plan 00323	\$35.47			•	•			•	99
	Plan 00523	\$40.69	•			•			•	99
	Plan 00623	\$48.75	•		<u> </u>	•	•		•	99
Community Care Rx	CCRX BASIC	\$31.17			•	•				89
	CCRX CHOICE	\$39.25			•	•				89
	CCRX GOLD	\$43.22		•		•				89
Coventry AdvantraRx	AdvantraRx Value	\$22.09	•			•			•	73
	AdvantraRx Premier	\$33.33	•			•			•	97
	AdvantraRx Premier Plus	\$45.56	•			•			•	97
Generations Healthcare	Generations Healthcare Standard PDP	\$38.19			•	•			•	85
	Generations Healthcare Enhanced PDP	\$62.46		•		•			•	85
Humana Inc.	Humana PDP Standard S5884-081	\$10.07			•				•	97
	Humana PDP Enhanced S5884-021	\$16.67	•			•			•	97
	Humana PDP Complete S5884-051	\$57.85	•			•		•	•	97
PacifiCare Life and Health Insurance Company	PacifiCare Saver Plan	\$32.45	•			•			•	77
	PacifiCare Select Plan	\$44.88	•			•			•	86
	PacifiCare Complete Plan	\$49.56	•			•	•		•	77
Prescription Pathway	Pennsylvania Life Standard Defined Reg 23	\$33.92			•				•	88
	Pennsylvania Life Act. Equ. Standard Reg23	\$43.18			•	•			•	88
	Marquette National Act Equ Std Reg 23	\$43.27			•	•			•	88
	Pennsylvania Life Enhanced #1 Reg 23	\$53.98	•			•			•	88
	Marquette National Enhanced #1 Reg 23	\$54.04	•			•			•	88
	Marquette National Enhanced #2 Reg 23	\$70.79	•			•			•	96
SilverScript	SilverScript	\$30.99		1	•	•			•	89
	SilverScript Plus	\$60.04		•		•			•	94
Sterling Prescription Drug Plan	Sterling Prescription Drug Plan	\$53.83		•		•			•	94
Unicare	Medicare RX Rewards	\$24.81		1	•	•			•	88
	Medicare RX Rewards Plus	\$32.50	•		†	•			•	88
	Medicare RX Rewards Premier	\$43.54	•	—		•	•		•	96
United American Insurance Company	United American Medicare Drug Plan	\$38.08	•			•			•	93
United HealthCare Insurance Company	AARP Medicare Rx by UnitedHealthcare	\$28.79	•	+		•			•	96
	United Medicare Rx - B	\$32.16	•	 	 	-	 		•	96
WellCare	WellCare Signature	\$28.86	•	 		•			•	86
	WellCare Complete	\$47.25	•	 		•			•	83
	WellCare Premier	\$50.98	•	+		•			•	82
YOURx PLAN	Medco Prescription Savings Plan	\$33.12	•	-			-		•	93
I OURX FLAIN	Interior Frescription Savings Flan	φ33.1Z		L		•	1	l	•	93